NOTICE OF INDEPENDENT REVIEW DECISION

September 12, 2002

RE: MDR Tracking #: M2-02-0800-01

IRO Certificate #: 4326

The has been certified by the Texas Department of Insurance (TDI) as an independent review organization (IRO). The Texas Workers' Compensation Commission (TWCC) has assigned the above referenced case to for independent review in accordance with TWCC Rule §133.308 which allows for medical dispute resolution by an IRO.
has performed an independent review of the proposed care to determine if the adverse determination was appropriate. In performing this review, relevant medical records, any documents utilized by the partie referenced above in making the adverse determination, and any documentation and written information submitted in support of the appeal was reviewed.
The independent review was performed by a physician reviewer who is board certified in orthopedic surgery which is the same specialty as the treating physician. The physician reviewer has signed a certification statement stating that no known conflicts of interest exist between him or her and any of the treating physicians or providers or any of the physicians or providers who reviewed the case for a determination prior to the referral to for independent review. In addition, the reviewer has certified that the review was performed without bias for or against any party to this case.

Clinical History

This 42 year old female sustained a work-related injury on ___ when she injured her lower back while lifting merchandise at a cash register. On 07/06/01 an MRI revealed transitional vertebra at L5 and degenerating discs at L4-5 with concentric annular disc bulge but no evidence of disc herniation. The patient's treatment included physical therapy and epidural steroid injections. The patient continues to complain of low back pain and the treating physician is recommending that the patient undergo a lumbar discogram with CT scan.

Requested Service(s)

Lumbar discogram with CT scan

Decision

It is determined that the lumbar discogram with CT scan is medically necessary to treat this patient's condition.

Rationale/Basis for Decision

This patient has axial pain with no radiation and has had appropriate management. She has had medications, conservative therapy, physical therapy, a negative MRI and time for healing. The patient continues to complain of pain and a discogram would determine if the pain is generated from a disc. If the pain is related to a torn annulus, this study would document that defect. If the discogram is negative, no surgical intervention is indicated and appropriate measures can be taken to return the patient to the work force. With persistent pain that is not explained, a discogram would provide additional information to etiologically corroborate the pain site. Therefore, the discogram with CT scan is medically necessary.

This decision by the IRO is deemed to be a TWCC decision and order.

YOUR RIGHT TO REQUEST A HEARING

Either party to this medical dispute may disagree with all or part of the decision and has a right to request a hearing.

If disputing a spinal surgery prospective decision a request for a hearing must be in writing and it must be received by the TWCC Chief Clerk of Proceedings within **10** (10) days of your receipt of this decision (20 Tex. Admin. Code 142.5 (c)).

If disputing other prospective medical necessity (preauthorization) decisions a request for a hearing must be in writing and it must be received by the TWCC Chief Clerk of Proceedings within **20** (twenty) days of your receipt of this decision (28 Tex. Admin Code 148.3).

This Decision is deemed received by you 5 (five) days after it was mailed (28 Tex. Admin Code 102.4(h) or 102.5(d)). A request for hearing should be sent to: Chief Clerk of Proceedings, Texas Workers' Compensation Commission, P.O. Box 40669, Austin, Texas, 78704-0012. **A copy of this decision should be attached to the request.**

The party appealing the decision shall deliver a copy of its written request for a hearing to all other parties involved in the dispute (Commission Rule 133.308 (t)(2)).

Sincerely,